FEC

STATEMENT OF

FORM 1	ORGANIZATION		
1 Olliwi 1	(See instructions)		Office use only
NAME OF COMMITTEE (in f	(Check if name Example: If typying is changed) over the lines	ng, type 12FE4M5	
WHO DAT PAC	;		
ADDRESS (number and s	treet) 499 South Capitol Street, SW		
(Check if address is changed)	Sujte 422		
	Washington	DC	20003
	CITY▲	STATE▲	ZIP CODE 📥
COMMITTEE'S E-MAI	L ADDRESS (Please provide only one e-mail address)		
(Check if address is changed)	whodatpac@gmail.com		
			11111111
COMMITTEE'S WEB I (Check if address is changed)	PAGE ADDRESS (URL)		
2. DATE 0 9	/ D D / Y Y Y Y Y Y Y Z O 1 1	• • •	
3. FEC IDENTIFICA	TION NUMBER C C00500256		
4. IS THIS STATEM	ENT X NEW (N) OR AMEN	DED (A)	
I certify that I have examin	ned this Statement and to the best of my knowledge and belief it is tr	rue, correct and complete	
,			
Type or Print Name of	Freasurer Randall Broz		
Signature of Treasurer	Electronically Filed by Randall Broz	Date 0 9	1 3 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of fals	se, erroneous, or incomplete information may subject the person sig		
Office Use Only		information contact: tion Commission 0-424-9530	FEC FORM 1 (Revised 02/2009)